

Medicare Preventive Services...

...To Help Keep You Healthy

There are steps you can take to lower your risk of disease and illness. Medicare is providing coverage for these preventive services to help you stay healthy. Medicare will cover:

- ⊕ Tests for breast cancer, cervical cancer, vaginal cancer, and colorectal cancer;
- ⊕ Bone mass measurements;
- ⊕ Diabetes monitoring and diabetes self-management; and
- ⊕ Flu, pneumonia, and Hepatitis B shots.

These new, valuable benefits from Medicare may be the key to long lasting good health. Talk with your doctor about your risk of developing these health problems and your need for these preventive services.

This pamphlet includes:

- ⊕ A chart that explains which preventive services are covered by Medicare, for whom they are covered, and what you pay.
- ⊕ Cards with more detailed information on some of the preventive benefits. You can tear these out and put them on your calendar or refrigerator as a reminder, or you can take them to your doctor so that you can talk about the preventive services that Medicare covers.



Medicare Preventive Services — Added Benefits to Help You Stay Healthy

Covered Service	Eligible Beneficiaries	What You Pay
Screening Mammogram: Once per year.	All female Medicare beneficiaries age 40 and older.	20% of the Medicare approved amount with no Part B deductible.
Pap Smear and Pelvic Examination: (Includes a clinical breast exam) Once every three years. Once per year if you are high risk for cervical or vaginal cancer, or if you are of childbearing age and have had an abnormal Pap smear in the preceding three years.	All female Medicare beneficiaries.	No coinsurance and no Part B deductible for the Pap smear (clinical laboratory charge). For doctor services and all other exams, 20% of the Medicare approved amount with no Part B deductible.
Colorectal Cancer Screening: Fecal Occult Blood Test Once every year. Flexible Sigmoidoscopy Once every four years. Colonoscopy Once every two years if you are high risk for cancer of the colon. Barium Enema Doctor can substitute for sigmoidoscopy or colonoscopy.	All Medicare beneficiaries age 50 and older. However, there is no age limit for having a colonoscopy.	No coinsurance and no Part B deductible for the fecal occult blood test. For all other tests, 20% of the Medicare approved amount after the annual Part B deductible.
Diabetes Monitoring: Includes coverage for glucose monitors, test strips, lancets, and self-management training.	All Medicare beneficiaries with diabetes (insulin users and non-users).	20% of the Medicare approved amount after the annual Part B deductible.
Bone Mass Measurements: Varies with your health status.	Certain Medicare beneficiaries at risk for losing bone mass.	20% of the Medicare approved amount after the annual Part B deductible.
Vaccinations: Flu Shot Once per year. Pneumococcal Vaccination: Once may be all you ever need — ask your doctor. Hepatitis B Vaccination: If you are at high or intermediate risk for hepatitis.	All Medicare beneficiaries.	No coinsurance and no Part B deductible for flu or pneumococcal vaccinations. For Hepatitis B vaccination, 20% of the Medicare approved amount after the Part B deductible.

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Colorectal Cancer Screening

Which colorectal screening benefits are covered under Medicare?

Medicare covers:

- ⊕ A screening fecal occult blood test (FOBT),
- ⊕ Flexible sigmoidoscopy, and
- ⊕ Screening colonoscopy.

The FOBT and the flexible sigmoidoscopy are considered to be general preventive screenings. However, if you are at high risk for colorectal cancer, Medicare will cover a screening colonoscopy. Medicare also covers a barium enema if your doctor decides that a barium enema should be performed instead of a flexible sigmoidoscopy or screening colonoscopy. *(over)*



Call 1-800-4CANCER for more health information.

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Mammography Screening

Which breast cancer screening benefits are covered under Medicare? How often are they covered?

Medicare will pay for a mammogram each year. Regular mammography screenings can save your life.

Who is eligible to receive a mammography screening?

All female Medicare beneficiaries aged 40 or older are eligible for mammography screenings every year. Medicare also pays for one mammography screening for female Medicare beneficiaries between ages 35 and 40. *(over)*



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Flu, Pneumonia, and Hepatitis B Vaccination

Which preventive vaccinations are covered by Medicare?

Flu shots, pneumonia shots, and Hepatitis B shots are covered by Medicare. Flu, pneumonia, and hepatitis can be life threatening to the elderly.

Who is eligible to receive the vaccinations?

All Medicare beneficiaries are eligible for flu shots and pneumonia shots. Hepatitis B shots are covered only for persons at risk for Hepatitis B, such as those with end-stage renal disease or hemophilia.

(over)



Call 1-800-638-6833 for more health information.

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Pap Smear and Pelvic Exams (Includes Clinical Breast Exam)

Does Medicare cover screenings to find cervical and vaginal cancers?

Medicare covers Pap smears and pelvic exams to check for cervical and vaginal cancers. In addition to the pelvic exam, a clinical breast exam is also covered to check for breast cancer.

Who is eligible to receive Pap smears and pelvic exams?

All female Medicare beneficiaries are eligible. *(over)*



Call 1-800-4CANCER for more health information.

Mammography Screening—Continued

Am I at high risk for breast cancer?

Simply getting older increases breast cancer risk. The older you are, the greater your chance of getting breast cancer. However, several factors that could place you at higher risk include:

- ⊕ If you had breast cancer before;
- ⊕ If you have a family history of breast cancer—that is, a mother, sister, daughter or two or more close relatives who had breast cancer; or
- ⊕ If you had your first baby after the age of 30, or if you never have had a baby.

How do I get more information about breast cancer and mammography screening?

Discuss breast cancer risk or screening with your doctor, or call the National Cancer Institute's Cancer Information Service at 1-800-4-CANCER.

Colorectal Cancer Screening—Continued

Who is eligible to get a colorectal screening?

Beneficiaries aged 50 or older are eligible for colorectal screenings. However, in the case of colonoscopies, there is no age limit.

How often will Medicare cover colorectal exams?

A fecal occult blood test is covered once per year and a sigmoidoscopy once every 4 years. If you are at high risk for colorectal cancer, Medicare covers a colonoscopy or a barium enema every 2 years.

Who is at high risk for colorectal cancer?

After age 40, colorectal cancer risk increases with age and throughout life. Your risk is greater if you have a history of inflammatory bowel disease, colorectal cancer, or polyps. You are also at greater risk if you have a family history of colorectal cancer or polyps, or have certain hereditary syndromes.

Pap Smear and Pelvic Exams—Continued

How often will Medicare cover a Pap smear and pelvic exam?

A Pap smear and pelvic exam are covered by Medicare once every 3 years. However, if you are a woman of child bearing age and have had an abnormal Pap smear within 3 years, or you are at high risk for cervical or vaginal cancer, Medicare will cover a Pap smear and pelvic exam every year.

Who is at high risk for cervical or vaginal cancer?

Risk for cervical cancer is increased if you have had an abnormal Pap test, if you have had cancer before, or if you have been infected with the human papilloma viruses (HPVs). If you began having sexual intercourse before the age of 16, or if you have had many sexual partners, you also have a greater cervical cancer risk. Risk for vaginal cancer is increased for daughters of women who took DES during pregnancy.

Flu, Pneumonia and Hepatitis B Vaccinations—Continued

How often will Medicare cover these vaccinations?

Medicare pays for a flu shot every year. You should get one each year between October and December. Medicare will also pay for a pneumonia shot, which you should get by age 65. Most people only need to get this shot once in their lifetime. Medicare will pay for a Hepatitis B shot if you are at high or intermediate risk for Hepatitis B.

Who is at risk for flu, pneumonia, or Hepatitis B?

Flu and pneumonia infections can be life-threatening for elderly people. All adults 65 and older should get flu and pneumonia shots. Those at high or intermediate risk for Hepatitis B include individuals with end-stage renal disease or hemophilia.